



COMMONWEALTH OF VIRGINIA
Department of Criminal Justice Services
Private Security Services Section
P.O. Box 1300
Richmond, VA 23218

www.dcjs.virginia.gov/pss

Status Hotline
(804) 786-1132
1-(877)-9STATUS

TRAINING SCHOOL STAFF CHANGE FORM

Please use this form to add and/or delete an instructor or designate an assistant school director for a training school. This form may be mailed to the above address or faxed to 804-786-6344.

School Name: _____ School Certification #: 88 – _____

Please add the following certified instructor(s) to the training school records:

Instructor Name	DCJS ID #	Hire Date	Instructor Signature (required)
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Please remove the following certified instructor(s) from the training school records:

Instructor Name	DCJS ID #	Termination Date
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Please add the following certified instructor as an assistant training school director:

Instructor Name	DCJS ID #	Hire Date	Instructor Signature (required)
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As the designated school director for the above training school, I understand that training conducted by instructors not certified in the specific category is considered null and void and will not be accepted by DCJS. I further understand that I am responsible for maintaining documentation of instructor qualification/certification for each instructor utilized by the training school.

School Director: _____

Print Name

School Director: _____

Signature

Date: _____